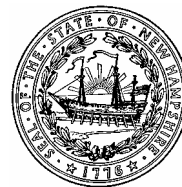




State of New Hampshire
DEPARTMENT OF ENVIRONMENTAL SERVICES
29 Hazen Drive, PO Box 95, Concord, NH 03302-0095
Phone (603) 271-2457 Fax (603) 271-7894



APPLICATION FOR 401 WATER QUALITY CERTIFICATION

1. APPLICANT INFORMATION

Name of Applicant _____

Address _____

City/Town _____ Zip _____ Phone # _____

Principal Place of Business _____

2. PROJECT INFORMATION

Name of Project _____

Address _____

City/Town _____ County _____

Receiving Stream _____

Drainage Basin _____

Description of Project _____

Project Schedule

Beginning of Construction _____

End of Construction _____

Operation Period _____

Name of Person Responsible for Project _____ Phone # _____

3. DISCHARGE INFORMATION

Is the discharge occurring or proposed? _____

Latitude/Longitude of Discharge _____

Name of Receiving Water _____

County _____

Drainage Basin _____

4. ADDITIONAL SUBMITTAL INFORMATION

- An original of a United States Geological Survey Quadrangle Map with the location of the project and its discharge.
- Copy of the complete federal permit application, including federal permit number.
- Copy of the wetlands permit.
- Copy of the alteration of terrain permit (RSA 485-A:17).
- Copy of any other state and local permits and application required by law.
- Name and addresses of adjoining riparian or littoral owners.
- Plan showing the proposed project to scale including:
 - Project Boundaries.
 - Location, dimensions and types of any existing and/or proposed structures.
 - Location and extent of water bodies, including wetlands.

Signature – **MUST** BE SIGNED AND DATED BY APPLICANT

To the best of my knowledge, the data and information, which, I have submitted to the New Hampshire Department of Environmental Services, is true and correct. I understand that an approval based upon incorrect data may be subject to revocation. I have complied with all local regulations or ordinances relative to this project and have obtained or will obtain, prior to the commencement of any work, all other approvals that may be required.

Date: _____ Signed: _____